

A HEALTH PROJECT
IN THE OAK PARK ELEMENTARY SCHOOL
TAMPA, FLORIDA

MOZELLE KING SOMMERKAMP

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THE UNIVERSITY OF CHICAGO
IN THE OFFICE OF THE DEAN
CHICAGO, ILLINOIS

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FLORIDA SOUTHERN COLLEGE

A HEALTH PROJECT
IN THE OAK PARK ELEMENTARY SCHOOL
TAMPA, FLORIDA

By

Mozelle King Sommerkamp

A PROJECT
SUBMITTED TO THE FACULTY
OF FLORIDA SOUTHERN COLLEGE IN
PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE
DEGREE OF MASTER OF ARTS

GRADUATE SCHOOL

Lakeland, Florida

June, 1948

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FLORIDA SOUTHERN COLLEGE

THE PROJECT

A Health Project in the
Oak Park Elementary School Tampa, Florida

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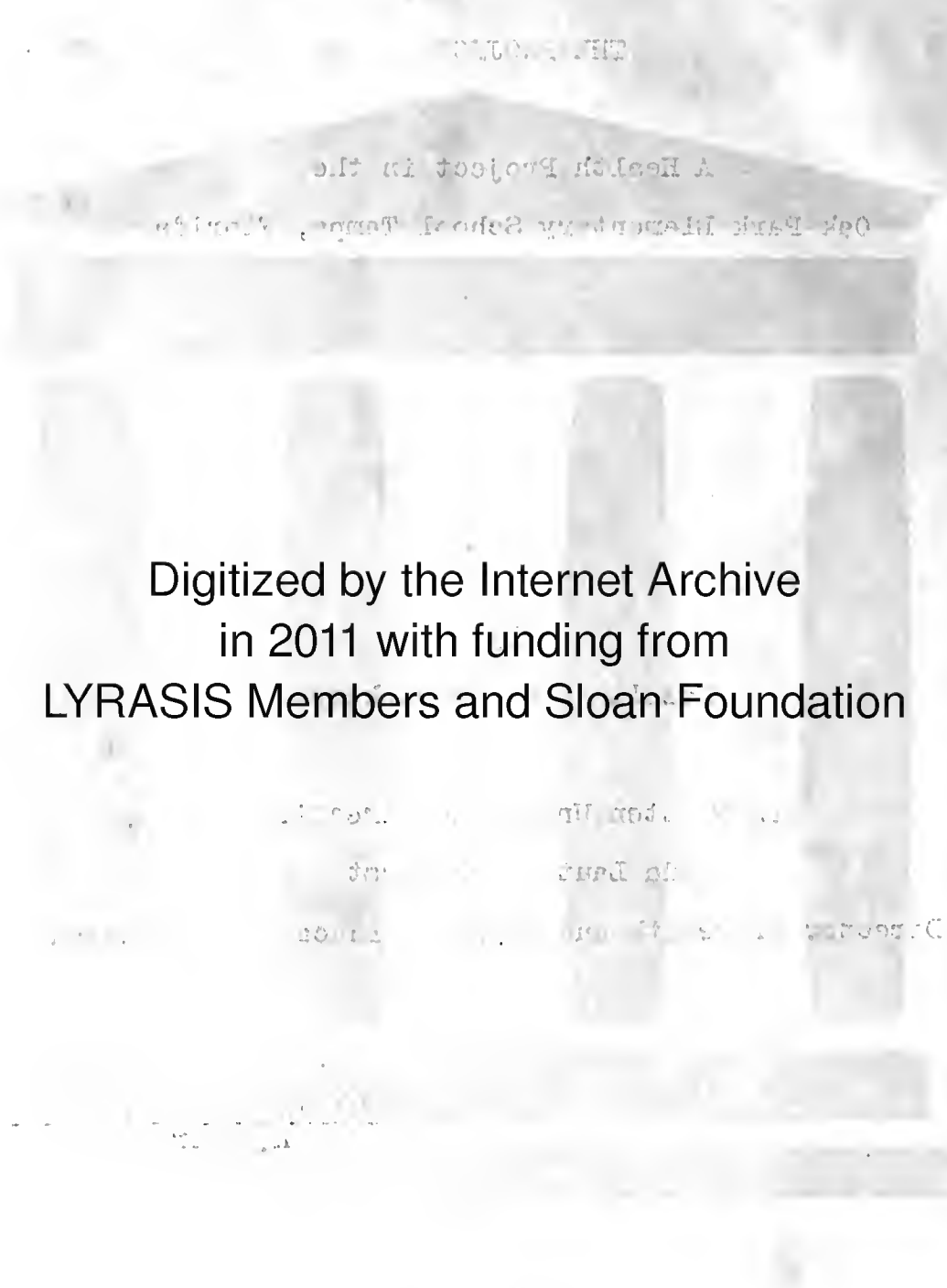
Was Written Under the Direction of

Eda Lauterback Horst

Director of Health and Physical Education for Women

Eda Lauterback Horst
Adviser

April 29 1948
Date



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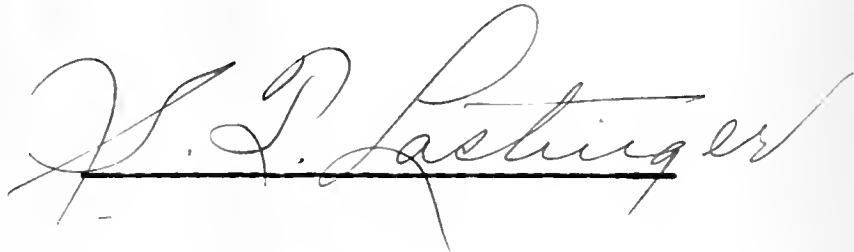
(Statement of Acceptance of Reading Committee)

The undersigned members of the reading committee of

Mozelle King Sommerkamp have examined her project

A HEALTH PROJECT IN THE OAK PARK ELEMENTARY SCHOOL

and recommend its acceptance.



Representative of the Graduate
Committee

Date of Submission to the
Chairman of the Graduate
Committee

(2) The Commission on the Status of Women

The Commission on the Status of Women is the only international body devoted exclusively to the promotion of the status of women. It was established in 1946 by the Economic and Social Council of the United Nations.

The Commission has a permanent secretariat located in Geneva, Switzerland.

The Commission has a broad mandate to study and make recommendations on all issues relating to the status of women.

The Commission has a long history of successful work. It has held numerous sessions and has produced a large body of work, including reports, resolutions, and recommendations. It has also played a key role in the development of international law and standards relating to the status of women.

The Commission has a strong working relationship with the United Nations and other international organizations. It also works closely with governments and civil society organizations around the world.

The Commission has a broad membership, including all member states of the United Nations. It also has a number of observers and consultants. The Commission's work is funded by contributions from member states and other sources.

(Statement of results of examination)

Mozelle King Sommerkamp has satisfactorily
passed the examination.

(Date of examination)

(continued on next page)

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PREFACE

This project had its inception February 1, 1942 when the author became principal of the Oak Park Elementary School, and has been brought to fruition in 1947 and 1948 while the author has been a student in the Graduate School of Florida Southern College.

Credit is here given to the entire faculty of Oak Park School, the lunch department personnel and custodians for their cooperation and assistance in the work undertaken and accomplished during the years of this health project.

Appreciation is here expressed to the agencies of the Florida Council for the Blind, the personnel of the Tubercular Association, the Women's Christian Temperance Union, The Board of Health at Jacksonville, Florida, the Citizens' Committee on Education of Florida, the members of the Hillsborough County Health Department, the personnel of Hillsborough County Instructional Materials Center, the Hillsborough County Trustees and members of the School Board, the people of the school community, the members of the Parent-Teacher Association of Oak Park School and the student body for their cooperation in this health program.

A HEALTH PROJECT
IN THE OAK PARK ELEMENTARY SCHOOL
TAMPA, FLORIDA

By Mozelle King Sommerkamp in partial fulfilment of a Master of Arts degree at Florida Southern College, Lakeland, Florida.

THE PROBLEM

GENERAL STATEMENT

The purpose in the investigation is to show how a planned program of school hygiene can improve the health of the children of an elementary school.

SPECIFIC PROBLEMS

The Oak Park Elementary School of Tampa, Florida presented a health problem, where usual difficulties were augmented by:

1. A transient population in the community, consisting often of migratory seasonal laborers of low, intermittent income.
2. A lack of city water and modern sanitation in many homes, with an evident hookworm problem.
3. A general income level below the average for the city.
4. A low community level of education, both general and in health measures; a general lack of understanding of the nature of disease on the part of the parents.
5. A general prevalence of diseases connected with a lack

REPORT OF THE COMMISSIONER OF THE BUREAU OF HEALTH

BY HONORABLE HENRY GOVERNOR OF THE STATE OF TEXAS
IN THE YEAR 1901

THE BUREAU

GENERAL STATEMENT

The purpose of the investigation is to determine the
prevalence of various diseases and to determine the
of an elementary school.

SECTION I

The first part of the report is a general statement
of the health of the people, based on the results of
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the investigation.

of cleanliness, such as pediculosis, scabies, et cetera.

6. A general condition of malnutrition among the pupils and their families.

DELIMITATIONS

The project was limited to measures:

1. Lack of funds on the part of the School Board for adequate lighting.

2. Lack of funds for care of the second floor (eleven rooms) with respect to toilets and fire escapes.

3. Limitation of publicly provided medical service to a visit by a physician from the Health Department to about three times a year and of a Health Department nurse to a visit of two hours or less once a week.

4. Lack of funds for adequate equipment and storage space in the lunch room.

5. General limitation of funds to money raised by the Parent-Teacher Association and the teachers through plays and other money-raising activities.

6. Lack of water, except for one well with an electric pump.

BASIC HYPOTHESIS

1. That the health of school pupils in a problem area may be raised by a knowledge and practice of correct health habits.

2. That the entire school personnel realize the need for health measures.

of electricity, such as hydroelectric, geodesic, or solar.

4. A general condition of the world for the year 1900.

10. The world.

THE WORLD

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3. That better health conditions would result in more effective education in the school

NEED FOR THE STUDY

The need for such a study was shown by a cursory examination of school conditions on the day the investigator became principal of this school. The inadequate lunch served and the prevalence of such conditions as pediculosis and scabies were among the outstanding health hazards. A lack of screens on the houses and generally bad dietary habits were additional factors.

INCIDENCE OF THE PROBLEM

The project was originally started February 1, 1942 on the investigator becoming principal of the school. The investigator's keen interest in health became more intensified in the literature of health through workshops in Tampa in 1945 and 1946 under the auspices of the University of Florida. In taking courses in Supervision and Administration at Florida Southern College in the summer of 1947, the investigator decided that the health project already in operation might be intensified and might furnish data valuable to schools in similar areas in other communities.

RELATED LITERATURE

The investigator has been aided by articles in the Elementary School Journal, School Life, Hygeia, Parents' Magazine, and such pamphlets as Toward Better Health (Research Council For

المسألة الأولى: في بيان ما هو المطلوب في هذه المسألة.

Dated at New York, this _____ day of _____, 19____.

1944

Figure 1. Schematic representation of the experimental design. The subjects were divided into two groups: the control group and the experimental group. The control group received a standard diet and water, while the experimental group received a diet supplemented with 0.5% of the test substance. The subjects were divided into two groups: the control group and the experimental group. The control group received a standard diet and water, while the experimental group received a diet supplemented with 0.5% of the test substance.

Economic Security), Health Agency (D.B. Armstrong M.D.), and pamphlets published by Saratoga Springs Commission. Others of aid have been "A School Health Service Plan for Lake County Schools" in Florida School Bulletin for January 1948, and Doctor C.E. Turner's book entitled "Personal and Community Health."

The investigator, however, has not surveyed historically the literature of school health.

PROCEDURE IN COLLECTING DATA

Time:- The writer included not only material collected after the project had been authorized as a partial fulfilment of the requirements of the degree of Master of Arts, but also data collected since she started the health program in 1942.

Place:- Oak Park Elementary School, 10th Avenue and 50th Street, Tampa, Hillsborough County, Florida.

Personnel:- Fourteen teachers (average)

Three lunch department ladies

Two custodians

One health department nurse (part-time cooperation)

Oak Park Parent-Teacher Association

Materials:- Equipment including the following provided by the investigator, teachers and the P.T.A.:

One hot water heater

One electric refrigerator

One gas range

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One stove hood
One three-compartment sink
One cooling fan
Two ice coolers
Linoleum covering for floor and tables in
lunch department
China dishes to replace porcelain ware
Storage cabinets
Nursery rugs
Individual rugs for sleeping (in primary
grades)
Cement benches in yard
Athletic equipment (such as swings, chinning
bars, et cetera.)
Visual education machine and screen for
showing health films

STEPS AND ORGANIZATION

Set forth in the report

PROCEDURE IN TREATING DATA

The report was written over a period of months based on a comparison of present conditions with those existing at the school before the project was instituted.

Limitations of need of correction, lack of funds and a limited amount of personal time available prevented the setting up of two groups using one as a control. It was felt that a "before"

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and "after" comparison would be sufficient to show the potentialities of such a program.

BIBLIOGRAPHY

See report

PERSONAL QUALIFICATIONS

Reading on school health in connection with two workshops of the University of Florida

Course in Mental Hygiene at Florida Southern College

The investigator has kept in constant touch with her physician, Doctor H.M. Faver, M.D. of Tampa, and with Professor Horst of Florida Southern College.

EDUCATION AND DEGREE

Girard High School, Girard, Alabama; graduate, 1913

Georgia State Teachers' College, Athens, Georgia, graduate
1918

Florida Southern College, A.B., 1934. Major in Education

George Peabody College for Teachers SS -- 1921 and 1944

University of Florida. Workshop at Tampa, 1945 and 1946

Florida Southern College. Graduate courses SS -- 1937
and 1947

PROFESSIONAL EXPERIENCE

Twenty-eight years in public school system (twenty-two
in Florida)

Principalship for the last six years

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CHAPTER II.

INTRODUCTION

Philosophy of School Health Instruction

As principal of an elementary school the writer has felt the tremendous responsibility of the power of influence one in such a position can wield over those under her charge. It is her sincere desire to make life healthier and thus happier for boys and girls as they unfold into worthy, noble manhood and womanhood, and ultimately become the citizens of tomorrow. This article gives the account of an earnest endeavor to promote a workable health program in an elementary school. These words are addressed particularly to those who have the care and teaching of children entrusted to them, whether by vocation or by any means that may place a helpless, trustful piece of humanity in their charge -- as it were clay in the potter's hands.

It is the hope of the writer that those who are entrusted with the responsibility and training of children may come to the realization that an opportunity is an obligation, and that theirs is the opportunity largely to mold and fashion the ideas of health and its importance in the lives of the youth. When they have reached this realization, may they gladly accept the obligation that opportunity has brought to them. May they so wield their influence upon the youth of the public school entrusted to them that health instruction will grow from theory to practice,

from something imposed to something sought, and from something endured to a way of living. May future generations, thereby, be stronger and happier mentally, physically, morally and spiritually because health instruction will be meaningful to them and because it will meet a need in their lives as boys and girls, as they pass through the phase of life which touches more persons than any other one influence the world knows -- the public school.

The writer's aim is to replace the idea that children must have certain diseases and are just going to be ill, with the idea that children are born to live and not to die. She wishes the truth of the expression, "You Are What You Eat", as one author expresses it, to be realized and accepted as largely true. It is her hope that people in positions of influence will lay stress upon the fact that what a child eats during the first ten years generally lays the foundation for the health and happiness of future life. She desires the fact emphasized that health practiced in the formative years determines largely one's happiness -- and that happiness is the most universally sought goal in life.

The aim in all health teaching is to produce healthful living. Health is one of the seven cardinal principles of education. Horace Mann has said, "Sound health is not merely the negation of ill, it is the medium through which alone we can gain access to many invaluable blessings. It enhances every

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pleasure, and is indispensable to the performance of almost every duty. It is the prime instrument for the performance of all the labors of life." ¹ In the purpose of education in American Democracy the Educational Policies Commission states, "The educated person understands the basic facts concerning health and disease, protects his own health and that of his dependents and works to improve the health of the community." ²

The importance of health and health habits cannot be over estimated. Establishing right health habits at elementary age is a bulwark of safety for future years. Teaching of health is a twenty-four assignment for each agency that affects the living of a child. Ideal practical health is teaching every day around the needs and interests of the child. Health connected with the total growth of the child and his development is a cooperative undertaking where all forces which influence the child's growth and development must work together. Many texts are now written to deal with everyday life. Materials can be used on the child's immediacy of need, interest and comprehension. The child needs to know the value of immunization against disease, what causes his teeth to ache, how his knees are skinned, what factors contribute to a cold, what the outstanding symptoms of the usual diseases are, what makes a balanced meal and the simple practical rules of health.

1. Horace Mann, Florida School Bulletin, p.15 as quoted by State Department of Education.
2. Educational Policies Commission, Florida School Bulletin, p.16 as quoted by the State Department of Education.

The preceding words may present the underlying philosophy of health of the personnel in the school to which the account refers.

Sanitation of the School Plant

The particular school is located on the edge of a city of one hundred and twenty-five thousand inhabitants. Its present enrollment is approximately four hundred pupils with a staff of fourteen teachers. There are three lunch department workers and two custodians. The school hours are from 8:45 to 2:45. There are many transient pupils which increase the responsibility of trying to give to each child's life at least an added touch of appreciation of the finer things of life, and arouse a desire to strive to reach a worth while goal. We shall now, as it were, step into the school atmosphere with the attempt to analyze its health program.

The school is located on a level tract of land comprising eight acres. The building is situated on the southeast corner with a northern exposure and extends along the south side which leaves at least four-fifths of the ground for play. The ground is level and free of indentures for inviting standing water. There are many trees well spaced for providing shade areas for children to play. Cement benches, strategically located under and around groups of trees, present inviting appeal to the children after lunch when play is forbidden and at other times when the thermometer registers too warm for active exercise.

Two sides of the grounds are surrounded by homes from which children emerge in gay colored frocks to rush into the halls and rooms of the school building. The other sides are bordered by a fence which protects them against busy thoroughfares where heavy traffic makes walking dangerous.

Although a corps of boy and girl patrols persistently and faithfully perform their duties, the heavy fast traffic has kept mothers as well as teachers on the alert for accidents. Finally, the first patrol on wheels in the United States was established. This means a white bicycle, labeled Safety Patrol, ridden by a boy patrol who travels up and down on the dangerous road morning and afternoon discouraging and warning against walking on the highway. This patrol was so chosen because of his strict adherence to duty and rigid acceptance of responsibility, his high degree of self control, his loyalty, faithfulness and dependability, and lastly, his long time in school and ability to mingle with people. His riding on such a wheel lends good psychological effect and children who have previously walked at random on the road where they participated in childhood fracas, now carefully keep to the sidewalks.

The building, composed of twelve classrooms, a book room, lunch cafeteria and an upstairs auditorium, was built without toilets upstairs which is a source of inconvenience to those occupying that portion of the building. There are no fire escapes although a larger part of the interior is made of wood.

Noises from the highway are negligible but there is a rail-

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road yard three blocks to the south where frequently classroom atmosphere is cut with the shrill notes of a whistle, or the laborious chug-chug of a passing locomotive.

Grass, which covers the entire yard except a small portion where trucks deliver orders to the cafeteria, prevents any excessive dust. The part without grass caused concern about dust and possible stalling of motor cars until an appeal from the P.T.A. persuaded the county commissioner to place loads of gravel and rock where needed. The also eliminates water from temporarily standing in front of three sets of steps immediately after a drenching rain. Odors from the kitchen were eliminated by the purchase of a hood placed above the stove and a circulating fan, both of which draw out odors to the inspector's satisfaction. In the basement absence of sunlight presents a problem but a suction device and constant cleaning keeps odors to a minimum. Steam heat provides comfortable warmth and thermometers placed in every room enable one to check and maintain an even temperature.

In several rooms the lighting was provided by only one drop light from the ceiling. On cloudy days it was necessary to take these children from their rooms to the lunch department for work. This deplorable condition has been improved very little. The improvement resulted from adding two more drop lights to rooms having only one, removing some trees which shaded the north side, and using higher powered bulbs. The candle power now is

far below the standard. The whole lighting situation must be greatly improved before the minimum standard requirement of twenty foot candles of light at each pupil-station on a dark day is attained.

Classroom ventilation meets the standard requirements. Windows in each instructional room are adjustable so that at least fifty per cent of each window can be opened for ventilation. Doors and main windows are provided to obtain adequate cross-ventilation in each classroom. Breeze windows are glazed with clear glass so that they provide light for hallways as well as ventilation for the classroom. Seventy-five per cent of the rooms meet the desired minimum of three breeze windows. The other twenty-five per cent have only two breeze windows. All windows in corner classrooms are on the side at the left of pupils or at left and rear. All windows in other classrooms are on the side at left of pupils. To reach the desired standard minimum another breeze window or ventilator must be added to twenty-five per cent of the rooms.

OBJECTIVES TO BE MET

Six new classrooms

A down stairs auditorium

A new lunch department

A new library

Toilets upstairs

Fire escapes and other safety measures

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Improvements in lighting to meet the standard requirement of twenty foot candles of light at each pupil-station on a dark day

Another breeze window or ventilator added to twenty-five per cent of the rooms to meet the standard

More built-in cabinets and bookshelves

CHAPTER III

AN EFFECTIVE LUNCH DEPARTMENT

Condition of the Lunch Department Before the Project was Begun:

EQUIPMENT:

Very little equipment

Inadequate storage space

One roach-laden ice box

A two-compartment sink

Scarred lunch tables

Open vessels on top of stove for heating water

No lavatory for personnel

Only one cooking stove

No oven for baking in quantity

Worn screens at windows

Only porcelain dishes

No forks for serving

No covering on floor or tables

No hood over stove to remove odors

No fan

No electric box for ice cream -- hence no ice cream
served

No cooling box for milk -- hence no milk served

No cooler -- hence no ice water

No adequately equipped first-aid kit

Insufficient utensils

CHAPTER II

THE HISTORY OF THE

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CHAPTER II.

No clock on lunch room wall
 No time and labor saving devices
 No tongs for handling food
 No radio or piano in department

PRACTICES AND PROCEDURES

Unsanitary cleaning of dishes
 No bactericide used in washing dishes
 Irregular and unsanitary disposal of garbage
 Much excess food prepared one day necessitating carrying
 it over until next day
 Left over food often uncovered
 Lax manners at table and undesirable behavior due to lack
 of teachers' supervision during lunch period
 Much storage in open and uncovered places
 Lunch money collected by teachers and children given lunch
 tickets -- soiled, worn lunch tickets created health hazard
 Class time consumed by teachers handling lunch money
 Prevalence of rodents in lunch room
 Water heated in open vessels on top of stove
 "Recess" instead of physical education
 Little class study of menus
 No state summer school courses attended by personnel
 No periodic study courses attended by personnel
 No report of test of water from school wells given to
 school or lunch department personnel

Connection between a septic tank and grease trap contrary to Florida State Sanitary Code

Lunches brought from home permitted to be eaten on the grounds

No definite time limit for eating lunches

No blessings at tables

Play with athletic equipment permitted directly after lunch contrary to state standardization

No intensified health program

Lack knowledge of foods on part of children

W.P.A. management in 1942

P.T.A. management in 1943

PERSONNEL

No health certificates for lunch personnel

No uniforms nor hair nets on personnel

No attendance of personnel at lunch department meetings or courses

MENUS

Improperly planned menus

Inadequate unbalanced meals

No meats served on plates of lower price

Sandwiches served daily and cookies and candy on sale

Very few plate lunches served

No milk nor ice cream served at lunch

APPEARANCES

Dark oiled floors

Dark unattractive interior

Oil cloth curtains at windows

Hygienic atmosphere lacking

No pictures on walls

APRIL 1968

Dark blue color

Dark blue color

Oil color orange

Hydrophilic color

In presence of water

A STUDY OF THE LUNCH ROOM DEPARTMENT

During the days of the W.P.A. the lunch room was a part of that administration and the meals in this particular one wholly inadequate for children's needs. The first menu critically observed was a small bowl of thin soup, three crackers and three prunes. The day the new principal entered the school this serving immediately presented a challenge to provide an adequate and nutritious lunch for these growing children. The following conversation took place between the new principal and the lunch department manager. "You are capable of planning and serving a well-balanced meal, I presume, or you would not have this position?"

"Yes," replied the manager, "but I have never been allowed that privilege, it has been done for me with no choice but to serve the menu given me."

"Well," said the principal, "my job is teaching and it is a full-time job, and yours is providing well-balanced meals that will satisfy hungry children. I shall not interfere at all with your sphere of work so long as you provide meals that meet the requirement. That is your responsibility and I believe you can do it."

Later in the day a teacher remarked, "I have been here many years and we have never had a satisfactory lunch room."

"Did you have a P.T.A. lunch room prior to the W.P.A.?" she was asked .

"We have no president," replied the teacher, "she has resigned."

The meals served under W.P.A. improved immediately and continued satisfactory. This occurred at mid-term and at the beginning of the new school term when officers were elected the group voted unanimously to attempt a P.T.A. lunch room. The association purchased a meat slicer and the lunch manager's policy was to serve a big bun with bologna, or other lunch meat every day, plus plenty of vegetables.

A cookie rack with a large assortment of cookies was placed in the lunch room. These sweets yielded high profits in money and as high a percentage in dental caries, as well as other harmful effects. Ice cream was added and milk, both chocolate and plain, but the children preferred the chocolate and did not take the plain (unless urged) until all the chocolate was gone. All bread was white and not enriched but even that was a long step in advance of conditions prevailing the previous years.

A dietitian was invited for a study course with the mothers. They studied the proper school lunch both brought from home and prepared and served at school. In making plans for the new year the value of whole wheat bread was tactfully and effectively presented to the Executive Board of the P.T.A. (for it was now a real, live, growing organization anxious to be of service to the school -- and the office of president was a coveted position.) They all approved of brown bread and

when the lunch department manager was approached on the subject she inquired what answer to give to requests for white bread. The principal assured her she would make it right with the children. The manager suggested getting half white and half brown until the children became accustomed to it. The principal pointed out that this would never work as all would want white bread since none of them were accustomed to brown bread at home. When the change was made a few children did ask for white bread and were told the bread man did not leave any that morning which satisfied them and the change was never mentioned again.

Another study course was held and more studying done. It was decided that the meat slicer for sandwiches had served its day. It was removed and the serving of sandwiches discontinued. Hot servings of meat replaced the cold meat sandwiches. Cookies, though they were profitable, were discredited with the conclusion that the object of the P.T.A. was to grow healthy bodies instead of reaping financial profits. So the cookie rack was disposed of and the policy adopted to place a single cookie on each plate when they were used, but usually fruit is used for dessert.

The old, roach-infested ice box was replaced with a modern electric refrigerator large enough to meet the needs of the school. No hot water was available except in great vessels kept steaming on the stove which seriously hampered the use of the surface for cooking. At the time water heaters were expen-

sive and rationed, but through wise handling a good used heater was procured from a plumber in another town. When installed it provided sufficient water for cooking and dishwashing. This heater was given an all over coat of aluminum paint that gave it the appearance of an entirely new one.

There was only a two-compartment sink and no lavatory in the lunchroom. With more money raised by the P.T.A. through suppers and plays, a new three-compartment sink was purchased and installed. This provides for washing through three waters the approved way. Crumbs are rinsed out, soapy water is used, then hot water containing a bactericide and finally a clear hot water furnishes the last rinse. The dishes are not dried. The old sink was then painted over with aluminum and one part designated as a lavatory while the other serves as a place for washing and preparing vegetables.

The cooking stoves were worn from long service and the ovens unsatisfactory. New ranges were ordered and installed. Porcelain plates and cups were replaced by china-ware. Cabinets were built and the wholly inadequate storage space greatly enlarged. An electric cooling box for the milk was installed by the dairy company supplying the milk.

The serving of chocolate milk came into question as to the effect upon the calcium content of the milk plus the added sweet. After thorough consideration the use of chocolate milk was discontinued.

A piano was donated to the lunchroom which adds entertainment for children on rainy days and different occasions.

The floor was dark and dirty looking from many oilings which absorbed much of the light. This was remedied with inlaid linoleum of a light color that is mopped daily and waxed weekly. The tops of the lunch tables were covered with the same material. Worn, soiled oil cloth curtains at the windows were replaced with smart, attractive, durable, washable curtains.

The walls had been a tan but had long since become besmeared and dingy. They were painted a light green with white ceiling, some of the work being done by one of the fathers who donated his services. Attractive pictures and health posters produced by the children are placed on the walls. The different classes vie with each other for their turn to furnish the health posters and decorations for holidays.

The lunch department personnel provide pot plants for permanent locations such as the top of the refrigerator and piano, while the children bring bouquets of fresh flowers for the tables.

The lunch department ladies attend all city and county lunch program meetings and summer courses which are financed by the P.T.A. The ordinary street clothes have been replaced by snowy white uniforms which lend much to the air of cleanliness. Hair nets are worn by each worker.

The principal and teachers are ever on the alert for opportunities to give information to parents, enlist their cooperation and establish the practice of right health habits in the growing children. The following incidents will serve

serve to demonstrate the value of such methods.

Roland came to school in September with his little body fairly covered with sores. Of course he had to be excluded from school for several days until these sores were considerably better. He and his sister ate regularly in the lunch department of the school. Suddenly Roland was not among those who ate there and upon inquiry it was learned that he went home for his lunch. It was also learned that he usually ate only bread, butter and syrup for lunch. Promptly the principal visited the home and the following conversation ensued. "How are you, Mrs. X? I came to tell you how we have been missing Roland in the lunch period recently. I was wondering why he comes home these days?"

"Well," she replied, "I never made my children eat anything in their lives they did not want and I do not want anyone else to do it. I hear you make them eat what is on their plates, so I just told them they could come home to eat."

"Well," replied the visitor, "I do not make them eat everything on their plates, but I do encourage it in various ways and I insist that they eat some of everything. You see our lunches are prepared with a child's welfare in mind and they are well-balanced and nutritious. Say, Mrs. X, have you taught Roland to cross the street on the green light and to wait when the light is red, or do you just let him cross when he pleases?"

"Certainly not," replied Mrs. X, "I have taught him

negative to demonstrate the value of their methods.

Polina came to school in regular dress.

They were covered with scars. Of course he had to be

the school for several days until he was

ably better. He had a sister who was

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"Well, it was," he said, "I

how to cross the street."

"But," replied the visitor, "Roland knows just as much about how to choose his food before he is taught, as he does when to cross the street before he is taught."

" You have to teach him safety in crossing the street and you also have to teach him safety in choosing his food. You see plants that are not fertilized turn yellow and fail to grow, while those with proper fertilizer are luxuriently green and bare fruit. So do bodies grow round and fat with proper nutritious food and well-balanced meals or thin and emaciated without proper food. It is not that children are so underfed as undernourished. They do not eat wisely. Just as people feed hens the proper food which has been proven will increase the egg supply, so proper menus have been proven to strengthen tired bodies, build up resistance to disease, provide energy for work and assure happy minds and healthful, well developed bodies."

After several minutes of continued conversation Mrs. X said, "Well, I am going to send Roland's lunch money down there from now on and you can get him to eat everything you wish."

At first the principal with the teacher helped Roland choose certain things he liked best. Soon he was indistinguishable among the many boys and girls as they took their plates and went eagerly to the tables and returned them empty, often with a request for a refill. In a short time Roland's skin was clear, his eyes bright and he was showing the results of proper

1. The first part of the paper is devoted to a general discussion of the problem.

2. The second part is devoted to a detailed analysis of the results obtained in the first part.

3. The third part is devoted to a discussion of the results obtained in the second part.

4. The fourth part is devoted to a discussion of the results obtained in the third part.

5. The fifth part is devoted to a discussion of the results obtained in the fourth part.

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27. The twenty-seventh part is devoted to a discussion of the results obtained in the twenty-sixth part.

28. The twenty-eighth part is devoted to a discussion of the results obtained in the twenty-seventh part.

29. The twenty-ninth part is devoted to a discussion of the results obtained in the twenty-eighth part.

30. The thirtieth part is devoted to a discussion of the results obtained in the twenty-ninth part.

food.

One busy morning there enrolled a very under privileged looking girl with eyes which appeared to be badly diseased. Upon questioning, she replied that they were sore. The school nurse was called in and she with the principal visited the home where they were told the child's eyes had been that way since she entered school and for that reason she had never attended regularly. She was now fourteen years of age. Promptly the principal contacted the Council for the Blind and made a date for Mary.

The principal carried her for the interview and was given a date with a local specialist. He diagnosed the trouble as malnutrition but prescribed some drops as well as vitamins. This necessitated a trip to the welfare agency which furnished a prescription to a local drug store. After three trips, one of which consumed over five hours, the child was started on a treatment.

Well-balanced lunches were given her at school since she could not pay for them. In three weeks her eyes were entirely clear and she was able to re-enter school. The attendance department advised during this long seige that, due to the child's age and health condition, her name be dropped from the roll, but a child's future was in the offing and through this procedure, at least some education will be attained and a child's life made happier. Many instances could be cited where the Council of the Blind afforded corrections for cross-eyes and various eye defects, where otherwise a child perhaps would have been handi-

1900

On the 1st of January 1900, the first of the new year, the weather was very cold and the wind was from the north. The snow was very deep and the roads were very slippery. The people were very busy and the shops were very crowded. The children were very happy and the old people were very sad. The day was very long and the night was very dark. The stars were very bright and the moon was very full. The sun was very hot and the wind was very strong. The people were very happy and the shops were very crowded. The children were very happy and the old people were very sad. The day was very long and the night was very dark. The stars were very bright and the moon was very full. The sun was very hot and the wind was very strong.

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capped for life.

SUMMARY OF IMPROVEMENTS IN THE LUNCH DEPARTMENT

IMPROVEMENTS IN EQUIPMENT

Inlaid linoleum covers the dark oiled floors and scarred tables.

A gas heater of ample capacity replaces open vessels on the stove.

A large refrigerator replaces a roach-infested ice box.

A hood over the stove removes the odors.

Two modern gas ranges are used in place of one.

A three-compartment sink has been installed and a lavatory and vegetable sink take the place of the two sinks previously used.

Four ice coolers more than meet the standard of one for each one hundred pupils.

A sanitary electric cooling box keeps milk cold where previously none was served.

An electric box provides cold storage for ice cream where previously none was served.

New screens replace worn ones.

China dishes replace porcelain ware.

Forks are used instead of spoons with children's plates.

Adequate cooking utensils replace skimpy ones.

Several pieces of time-saving equipment have been purchased.

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An accesible first-aid kit properly equipped meets the standard of the State Board of Health.

A radio and piano in the lunch department provide entertainment and information for both lunch personnel and children at opportune times.

A large wall clock keeps the children cognizant of the time they have and thus encourages eating more slowly and practicing better table manners.

Tongs are used for handling bread and other foods where hands were previously used.

The storage space has been more than doubled.

An unsanitary connection of a septic tank and lunch department grease trap has been eliminated. The two have been piped separately and enlarged sufficiently to meet the demand.

IMPROVEMENTS IN PROCEDURES AND PRACTICES

Teachers handle no money for lunches. It is handled by a cashier in the lunch department.

Garbage is picked up daily by a mother who in turn gives a pig to the school for the use of it. The pig yields money to the school and garbage disposal is prompt and sanitary.

No one is allowed to work in the lunch department or go back of the counter unless wearing a hair net and possessing a health card.

There is much improvement in quantity cooking with very little to carry over to another day.

All food is covered and all storage is in closed cabinets.

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Manners at table and public behavior have greatly improved with wise supervision during the lunch period.

Though the entire building is not rodent proofed a contract with an extermination company provides a weekly check and evidence shows marked improvement.

Posters are made by children with a meaningful purpose.

A blessing inspires reverence, thankfulness and fosters better order.

Provision is made for each pupil to have a minimum of fifteen minutes at the table thus meeting the standard requirement. (This eliminates the hurried element so undesirable for good table manners and also harmful physically.)

No physical education activities are scheduled for thirty minutes before or after lunch for any group of pupils thus meeting the standard requirements.

The intensified health program keeps waste of food at a minimum and fosters eating at least some of everything on the plate.

The "clean plate brigade" is the policy.

Eating lunches on the grounds is not permitted. Previously those children who brought their lunches from home were allowed this privilege.

An efficient P.T.A. Lunch Department replaces a W.P.A. Lunch Room.

Weekly waxing of the floors maintains a good appearance.

Periodic study courses are held and continuous improvement prevails.

A bactericide is used in washing dishes with no drying where previously the dishes were cleaned the ordinary way.

Hygienic atmosphere pervades.

Menus are studied and often provided by the classes.

Many cooperative helpful suggestions are given by children and followed by the lunch personnel.

Children know what they should eat and why, why certain foods are necessary, the value of certain vitamins, why sandwiches and cookies are not served, why milk and vegetables are served with each lunch, et cetera.

IMPROVEMENTS IN PERSONNEL

All school personnel, including the principal, teachers, clerks, custodians and lunch department workers, obtain an annual health certificate on the form prescribed by the State Board of Health, signed by a physician who is officially approved by the County Board of Public Instruction. The health certificate for lunch personnel is displayed in the department.

Hair nets are worn by all personnel and snowy white uniforms replace ordinary street clothes.

The personnel attends all local meetings and some attend State-Summer Courses(financed with P.T.A. funds).

IMPROVEMENTS IN MENUS

Cookies, sandwiches and knick-knacks have been eliminated.

A minimum of two ounces of meat is placed on all plate lunches where previously two prices for lunch made meat unavailable with the plate of the lower price.

1. The first thing I noticed when I stepped
out of the plane was the cold air. It was
a sharp contrast to the warm air of the
tropical island. I had heard that the
weather was perfect, but I didn't realize
how cold it would be. I was told that
the temperature was in the 70s, but I
felt like I was in the 40s. I was
wearing a light shirt and shorts, and
I was not prepared for the cold. I
needed a jacket, but I didn't have one.
I was in a bit of a predicament.

The First Night

The first night was a bit of a
challenge. I was staying in a small
hotel, and the room was not very
comfortable. The bed was hard, and
the pillows were not very soft. I
was used to a very comfortable bed,
so this was a bit of a shock. I
also noticed that the room was not
very clean. There were some stains
on the walls, and the floor was
dirty. I was a bit disappointed,
but I decided to make the best of
it. I went to bed early, and I
tried to get some rest. I was
tired from the long flight, so I
needed some sleep. I woke up in
the morning, and I felt a bit better.
The room was still not perfect, but
it was better than I expected.

The Second Day

The second day was a bit of a
disappointment. I had heard that the
beaches were beautiful, but they were
not very good. The sand was not
white, and the water was not very
clear. I was a bit disappointed,
but I decided to go anyway. I
went to the beach, and I saw some
people. They were all from the
United States, and they were all
on vacation. I was a bit surprised,
but I decided to join them. I
went to the beach, and I saw some
people. They were all from the
United States, and they were all
on vacation. I was a bit surprised,
but I decided to join them. I
went to the beach, and I saw some
people. They were all from the
United States, and they were all
on vacation. I was a bit surprised,
but I decided to join them.

Milk goes with all lunches(included in the price).

Well-balanced menus replace wholly inadequate meals.

White milk and whole wheat bread are used in place of chocolate milk and white bread.

IMPROVEMENTS IN APPEARANCES

The interior has been painted a light color replacing dark colors.

Colorful pictures and posters make the walls attractive and inspire better food habits.

Pretty, colorful, washable curtains replace oil cloth at all windows in the lunch department.

Growing plants add much to the appearance of the department.

Weekly waxing of the floors maintains a good appearance.

WHAT REMAINS TO BE ACCOMPLISHED

A large refrigerator is needed so that meat can be purchased in quantity.

A fan for comfort for the lunch department workers.

A large oven for baking(apart from the regular stove).

Several time saving and labor saving devices, as a mixer-master and dish washer.

More storage space to meet the required state standard of one half square foot per meal served.

Doors rehung so that both open the same way to meet the

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required standard

Tables and seats of various heights to meet the needs of all children

Windows that open out easily instead of the heavy ones to raise

Window deflectors

A private rest room and a new lavatory for lunch personnel

The entire building rodent proofed

A counter rail

A service table with casters

CHAPTER IV

PREVENTION OF COMMUNICABLE DISEASES

CONDITIONS BEFORE THE PROJECT WAS BEGUN

No whooping cough immunization

Approximately no immunization among preschool children

Approximately five per cent typhoid immunization

Approximately ten per cent diphtheria immunization

Approximately twenty-five per cent of children infested with pediculosis

No bulletins on health needs and practices issued from the office.

A STUDY OF THE IMMUNIZATION PROGRAM

At first practically no children had been immunized before entering school, and then many parents because of lack of knowledge refused to allow the school doctor to immunize their children. Notes were sent out urging the people to avail themselves of this opportunity and stress was laid upon diphtheria immunization, but there was very little response. A clinic was held for preschool children and three babies were brought.

A tragic instance occurred in the neighborhood -- a case of diphtheria of a small baby proved fatal. Immediately, the principal took advantage of this and again notes were sent to all parents citing this incident and stressing immunization for safety before a greater toll of human lives were taken. A

CHAPTER IV

PROTECTION OF COMMUNITARIAN CRIMINALS

CONDITIONS BEFORE THE PROTECTIVE ACT

The following conditions must be satisfied

Approximately no information about the criminal's activities

Approximately five per cent of the population must be

Approximately ten per cent of the population must be

Approximately twenty-five per cent of the population must be

for the purpose

No restriction on health records and protection of the

the office.

A REVIEW OF THE PROTECTIVE ACT

At first the protective law was a simple law of the kind of

for criminal school, but later it was changed to a law of the kind of

knowledge was used to allow the police to know the criminal's

children. Notes were sent out to the police to know the criminal's

before it was opportunity for the police to know the criminal's

information, but there was no restriction on the police's

and held for protection children and the police's

A law was passed on the police's

or children's and the police's

law of the police's

all persons living in the police's

safety before a person's

doctor was secured through much persuasion, as the scheduled day for the school was several weeks in the future but the opportune time was the present and the day was announced. This time one hundred and three preschool children responded to the call.

A mother of three children enrolled the oldest and rather reluctantly consented to her being given diphtheria immunization, but steadfastly refused it for the younger children. Later in the year the two preschool children contracted diphtheria and one came very near being a fatality. When they were well the mother brought them to school and made this remark to the principal, "I never knew one little shot could make so much difference. Because you insisted on the oldest little girl having the immunization she has not been ill at all, while my other two children have been seriously ill and we are now burdened with a large hospital bill." She then showed the scar in the throat of one of the children where a tube had been necessary during his serious illness.

The child was well known in the community and the principal, ever on the alert for a powerful illustration, passed this information on to the parents in the future health drives. Stress continued until ninety-five per cent of all the children were immunized against diphtheria.

During the next vacation there was much rain and many low places and excavations were filled with water. The principal kept in touch with the Health Department during the summer

and had the doctor and nurse ready to come to school the week after its opening. Explanatory notes were sent this time, still stressing diphtheria but more particularly typhoid, due to the prevalent water. Names were posted and children vied with each other to make their classes one hundred per cent in immunization. Finally, a high percentage was reached in the school.

Later in the year the newspaper carried a notice of several cases of smallpox in New York City. Immediately the race was on and the atmosphere was charged with such remarks as , "Let me see your scar." Incentives such as a health film or some outstanding privilege was extended to those who could show a scar. Soon a large majority of the children proudly exhibited their scar. Only a small portion of upper grade children still refused to be vaccinated. Then the principal offered a weiner roast to those who would take the immunization. About forty upper grade children agreed in order to go to the picnic, and the year eanded with all except nine of the four hundred and eighty-four children vaccinated.

Then the D.P.T. shots came into notice and a drive was made to have all preschool children receive this immunization. There was a fatality from tetanus in the neighborhood which aroused the people and afforded the principal a dynamic illustration.

A census was made in the rooms and bulletins carried information to parents concerning the evil results of whooping

cough and tetanus, since the need for diphtheria immunization was already recognized in the community. All preschool children's names from six months up to six years were obtained, and the children contacted by the principal. The doctor came to school on a set date and the halls were filled with children and mothers awaiting immunizations. Thus the high percentage attained in other immunizations was recorded for this triple shot.

Now as a child is enrolled the mother is asked to fill out blanks so that her children may be protected from all possible diseases and the school's high immunization record retained. Health films from the State Board of Health, the County Film Library and representatives of the Tubercular and Polio Personnel Control are used as often as possible and very effectively. From the W.T.C.U. films and speakers presenting alcoholism present this evil with force. The P.T.A., Safety Patrols, and teachers sponsor safety plays and radio programs.

Early in the spring the summer round-up is begun. A census is taken of all preschool children who will enter school the following year. This is done by asking all children to bring names of any relatives, friends and neighbors they know who will enter school that fall. Bulletins are sent out to parents giving the needed information and asking for any names they may be able to supply. These names and addresses are turned over to the summer round-up chairman who makes her contacts.

A clinic date is set and given much publicity. The summer round-up chairman is there welcoming mothers and assisting them and their children in being comfortable, and providing transportation where needed.

But her work does not end on this first day. She continues busy throughout the summer months. Cards are mailed to all prospects reminding them of the clinic date which is held monthly. The chairman meets each clinic day and makes friends with the mothers and children. She checks off the names of those who come, which leaves the remaining names to become the roster for her next cards. The principal meets with them when possible. This gives a good contact for the school and a warm feeling of welcome and friendship to the new parents and children.

At the first P.T.A. after school opens all children who have met the required qualifications are notified to be present and blue ribbons are presented to them. A photographer is present and their pictures appear in the next day's paper. This provides an incentive and desire to have the doctor check them in order to get the blue ribbon and see their pictures in the paper.

The May Day Festival, which is an event in most schools, usually causes a controversy over how the king and queen are to be chosen. Most methods are critically questioned by many in the school community. In stressing health it was decided to use the same rules for the May Festival King and Queen as the City

Recreation Department used to elect a city-wide king and queen. The school's personnel is called the May Day King and Queen of Healthville. To promote health consciousness and desire for attainment in every grade, it was decided that a king and queen would be chosen from each room. This means that the children with the best health record will automatically become king and queen. The children know that unless they have all the immunizations they are not eligible as candidate for king and queen. Teeth is next in consideration and much stress is placed on clean teeth and absence of dental caries.

The following factors are used by the city in selecting its king and queen: weight, height, general appearance, posture, personality, heart, lungs, throat, teeth, eyes, ears, attitude toward health practices, and general health, including immunization against smallpox and diphtheria.

The principal and school nurse worked out a system of one hundred points whereby each health factor was allocated its proportionate number according to its rank in importance. The children listed the factors with their corresponding points and with the teachers worked out their scores by considering carefully each obvious point. Those with the highest scores were screened out for the doctor's final checking of such points as heart, lungs, throat and anemia. Credit is given for such corrections, as dental corrections, glasses, tonsil operations, et cetera. Stress is laid upon giving credit for corrections. Each child has his sheet containing the list of objectives and

showing how he scored on each point. The attainment of the points not met becomes the future aim.

These sheets are kept by the children and a copy filed in the office. At the beginning of the new year each child sees the points he failed to attain the previous year and studies how he can improve his score for the coming year. Scores on teeth are encouraging in that temporary teeth at this age are being replaced by new good permanent ones. This is emphasized so that a child with bad teeth one year knows that he still may have good ones the next year and not become discouraged in his efforts. Needed requirements are mentioned often with the one aim in mind that the children may become health conscious.

Many remarks such as these are heard in the school atmosphere, "I am having my teeth fixed so that I can be the School Queen." "The doctor says I am all right except for bad tonsils. Will it be all right for me to miss a few days of school so that I can be eligible for queen?" "If I eat all on my plate will I get the points for attitude?" "I do not like this but I am going to eat it." "My children would never eat vegetables before but now they do and I am so pleased." "My boy has been in line for king every year and missed it on account of his teeth. I determined they would not cause him to miss it this year and I am so happy he is king."

Of course, the boy and girl with the best health record become king and queen in the school, and enter the city recreation contest where, if they do not win they still serve as

of which has not been recorded in the history of the

points not yet recorded in the history of the

These points are found by the examination of the

in the office. At the beginning of the year, the

the points in relation to the points in the year

how he can improve his work for the coming year.

Each of the points in the year is temporary work

being replaced by new good permanent ones.

so that a child with bad habits can be replaced

have good ones. The best way to do this is to

effort. No child is ever without a good habit

and in time the child will be a good one.

Many children have been found to be

misplaced. "I am living in a bad place,"

School Order." "I am living in a bad place,"

order. "I am living in a bad place,"

school so that I can be a good one.

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this for I am going to be a good one.

vegetables for me and I can be a good one.

boy has been in line for the year.

count of the year. I can be a good one.

that is this year and I can be a good one.

of course, the year is a good one.

because this year is a good one.

ation center of the year is a good one.

lord and lady in the city May festivities. The others from the upper grades become lords and ladies in the school festivities, and from the lower grades fill such places as flower girls, train bearers, et cetera. No one feels that this method of selecting the king and queen is unfair, or just results from popularity, or can be obtained by the child who can furnish the most money. This procedure certainly makes the boys and girls health conscious(the desired aim).

A chest X-ray campaign is given in the county annually. Parent-Teacher members participate in city-wide meetings preparatory for the campaign, and charts and posters are placed in the school building and exhibited in public places. Personnel from the Society for Tuberculosis deliver talks in P.T.A. meetings and provide pertinent films to show the children. This subject is used as instructional material during the drive and units may be developed on the subject. Mimeographed letters are sent out periodically a few weeks previous to the drive. These contain informative material and stress the importance and value of the X-ray. Lack of expense is emphasized and all persons of eligible age are urged to avail themselves of this opportunity.

A census is taken of every person over fifteen in the home and a questionnaire is sent out periodically asking if the X-ray has been taken. An honor roll is placed in each room, and as soon as it is reported that each eligible person in the home has received the X-ray a star is placed by that particular

child's name. Much stress is laid on the fact that a card is received by all who are free of the disease, which can be carried by the person at all times. At each assembly during the drive public recognition is made of those who have merited the star. Toward the end of the drive those who have not received the X-ray are contacted by the principal and urged to do so. At the end of the drive a ribbon is awarded each child who won a star.

All school personnel is required to obtain a health certificate. This includes custodians, lunch department personnel, bus drivers, secretaries, teachers and administrators.

Pediculosis was a serious problem. In 1942 approximately twenty-five per cent of the children were involved. It seemed there was no way to rid the school of it. Exclusion was tried but long absences evoked no total riddance and did affect greatly the child's work and promotion. It meant prolonged absence only to find that the particular child might be rid of the menace but the others at home were not and were a constant source of reinfestation. Before long the condition would be as bad as before.

Finally, notes were sent at the close of the school year urging children to become free of this disease by the time of the opening of school in the fall. Then during the first days all heads were examined through cooperation of the health nurse. Willing help from the mothers was refused because it would prove unethical. Names of all those re-exam-

ined weekly on the nurse's visit to the school. In the beginning it was done on a set day but soon some of the older girls began staying out on that date. Of course they were promptly checked on the following day. When they found it was a weekly affair, regardless of the day, absences ceased and the examinations proved more and more effective. If any were drastic cases they were excluded from the school with directions for treatment, and if not back in three days the home was visited. As long as any sign appeared the name remained on the list in the office. Since they could not attend school with this disease, and the attendance department checked on their absences, the condition improved rapidly.

Now, the school is entirely free of them -- but eternal vigilance keeps it so. The entire school enrollment is checked about once a month and any infested called together weekly. All new children are checked upon their entrance. This plan is the most effective ever used.

CONDITIONS AFTER PROJECT ON COMMUNICABLE DISEASE CONTROL:

Ninety-eight per cent diphtheria immunization

Ninety-nine per cent smallpox immunization

Ninety-five per cent typhoid immunization

A large per cent of preschool children immunized against tetanus and whooping cough

Approximately ninety-five per cent preschool children immunized against diphtheria

Pediculosis entirely eliminated

Informative bulletins issued periodically encouraging better health practices.

An improvement in children's knowledge and practice of health habits.

Mothers becoming increasingly more health conscious

People of community at large growing more and more health conscious

WHAT STILL REMAINS TO BE DONE

This is practically all of an educational nature some of which are cited as follows:

A change in general attitude toward healthful living

A recognition of the necessity of healthful practices

A knowledge of the value of a hygienic atmosphere

A knowledge of child psychology and child care and training

The development of a more serious acceptance of responsibility for one's own children's health and training

A recognition of the harm of attending movies, listening to radio programs and reading comics which are not conducive to character building and emotional stability

A knowledge of the amount of hours of sleep required at different ages, a recognition of the need for it and the consistent practice of it

A knowledge of the right foods, and the necessity of "eating to be healthy" versus "eating what you like"

Intermittent and irregularly occurring
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A knowledge and practice of the simple preventative and curative measures

The development of a greater appreciation for the necessity of immunization and thus a greater practice of same

A recognition of the necessity and practice of isolation of communicable diseases

A number of points are to be made in the following paragraphs

and it is hoped

The following is a list of the points to be made

1. The first point is the necessity of a

2. The second point is the necessity of a

3. The third point is the necessity of a

CHAPTER V

THE COUNTY HEALTH DEPARTMENT -- A COOPERATIVE AGENCY

HEALTH DEPARTMENT ACTIVITIES BEFORE THE PROJECT

A yearly examination with no follow-up

Very few school visits from the nurse during the year

Very few home visits by the nurse

A STUDY OF THE HEALTH DEPARTMENT ACTIVITIES

A community agency closely allied with the school is the health department. This department is of value to the teacher in providing information, as well as of aid to the home and child. All school personnel cooperate in making a success of the days set by the health nurse on which the doctor visits the school. The principal, nurse, doctor, dentist and summer round-up chairman are all serving in one great cause to minister to the child's health needs.

The principal notifies the health department of any suspected communicable disease and provides a place for the examination to be made. She cooperates in every way with the school nurse and helps and encourages the teachers in the use of the records.

The nurse meets with the faculty at the beginning of the school year and explains the records to be kept and the health program for the year. She provides the teachers with various health bulletins including a chart giving details of

Page 10

THE COUNTY HEALTH DEPARTMENT -- COOPERATION

HEALTH EDUCATION ACTIVITIES IN THE SCHOOLS

Very few schools have no health education.

Very few schools have no health education.

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HEALTH EDUCATION ACTIVITIES IN THE SCHOOLS

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communicable diseases. Her duties are wide in scope.

A certain day is set each week on which the nurse visits the school. At this time she assists in testing eyes, examining heads for pediculosis and checking throats. She provides tests for hookworm and furnishes the school with reports of the findings. Notices for treatments such as pediculosis, scabies and impetigo are sent out. She judges whether a child should be excluded from other children, and takes home those who may become ill while she is present. She takes temperatures and visits the homes with follow-up treatment. A duplicate health record is made, one of which she files at the health department, and the other she gives to the school. These as well as other helps make her assistance invaluable.

She gives guidance and explains health problems to parents, teachers and children. She advises the parents concerning needed financial assistance which may be available. She discusses with the teachers, ways in which she may be of the most help in her limited time. Individual and group teacher conferences are held giving dates for screening, explaining physical findings, giving instructions in detecting signs of contagious diseases, et cetera.

The nurse arranges for a day on which the health department sends a doctor and an assistant nurse to the school to examine all beginners. This is done early in the fall. This examination includes such as checking eyes, ears, nose, throat, heart, posture, skin, teeth, glands, weight and nu-

trition, and the giving of immunization needed. Children in other grades are screened for obvious symptoms and checked. The nurse works with the doctor and a record is kept and entered in her files while another is given to the teacher. The parent is urged to be present at the examination. This provides an incentive to her to try to afford maney for the correction.

The greatest problem is the follow-up to assure the correction. Many parents need informative education concerning the care of their children, as for instance the filling of temporary teeth, which of course many contend is not necessary. This gives an opportunity to cite the contamination of foods coming in daily contact with the decaying teeth, early extractions causing teeth to become misplaced and mouth misshapen, et cetera. Such information may be given them in bulletin form. It is the policy of the school to send these bulletins out periodically.

A dental examination is made early in the year and the report sent to the parent asking that the correction be made. A form is sent to parents who are financially unable which is filled out and returned to the school. The P.T.A. arranges transportation to the dental clinic for those children who can not afford the expense. Periodically a dent-o-mobile is placed on the grounds for making the needed corrections. As soon as a parent has the correction made he notifies the school.

IMPROVEMENTS IN THE HEALTH DEPARTMENT ACTIVITIES SINCE THE PROJECT WAS BEGUN

Periodic visits by health department doctor

Weekly visits by health department nurse

Follow-up work in many cases

Visits to homes of children by nurse

OBJECTIVES STILL TO BE ACCOMPLISHED

A larger percentage of children examined yearly

More follow-up work after examination

A better knowledge and practice of health habits on the part of the children and the parents.

A higher percentage in daily attendance

More informative literature on preventive health sent into the homes by the health agency and school personnel

All mothers present when their children are examined

CHAPTER VI

HYGIENIC ATMOSPHERE

CONDITIONS BEFORE THE PROJECT

No rest period after lunch

No individual rugs for rest in primary grades

Active play after lunch

No nursery rugs on floors of primary rooms

Basic readers sent with younger children for mothers to help them

Approximately no pictures in rooms to give pleasure

A STUDY OF THE HYGIENIC ATMOSPHERE IN THE SCHOOL

Mental hygiene is a great factor in a child's life. Care is taken in planning the program of a day's work so that the hurried element so harmful in a child's routine is eliminated. The schedule is so arranged that recitation and study periods are not too long. Active periods follow those of the opposite type, a rest period after play, et cetera. A policy has been adopted that homework shall not exceed an hour and that it be thoroughly understood by the child before it is carried home. With the small child, reading is sent home only when it has been mastered and he is proud to show how much he has accomplished. Hence, he derives a feeling of success from his rendition, rather than the reaction of a disgruntled parent because of lack of accomplishment. The parent-teacher and pupil - teacher relationship is most important to the child's

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progress and sense of well being. Every child must have a feeling of success.

An atmosphere may present beauty which delights the eye and affords to the child's busy day. Pictures lend attractiveness and inviting appeal which strengthens love for school and makes for a happy environment. There were only a very few good pictures in the entire school. It was resolved that there would be as many as three masterpieces in each classroom and others hung in strategic places in the halls.

Much interest in the pictures was aroused by each class choosing a picture and posing it in an entertainment of "Living Pictures." The child most nearly like the person in the picture did the posing. Each class used its chosen picture for study and reproduced the background in art. Suitable music was chosen to be played while the picture was exhibited. For example, the picture, "Spring Song" by Glucklich was posed while "Spring Song", by Mendelssohn was played. This activity not only affords happy interest in work but produces a feeling of pride in ownership when the picture chosen by a class is hung in that room. It indelibly stamps the particular picture in the child's mind and the community learns to appreciate good art. It is a policy of the school to give an entertainment annually. In this way the school will not only obtain the pictures desired but foster a cultural atmosphere and a knowledge and love for art.

Nursery rugs have been placed on the floors in primary

rooms, Where all floors were oiled they are now sanded, varnished and waxed and marred desks have been treated likewise. This greatly improves the appearance and cleanliness of the classrooms, and lightens the custodian's load. Junior Primary children are placed in adjoining rooms and one phonograph plays restful music after lunch for as many as four rooms, while the children relax on individual rugs.

The building is open on cold and rainy days and the children come immediately into the school where the principal or a teacher leads songs with the group or otherwise provides a pleasant atmosphere until it is time for them to go to their rooms.

Keeping paper off the yard was a problem, and although it is the custodian's duty, it can be used as an activity to arouse in the child a pride in the appearance of the yard at school. If he is given some responsibility in keeping these grounds clean, it is the hope that it will carry over into the home life.

An effective plan was worked out whereby certain grades, usually the third and fourth, were responsible for the paper. The art classes made pennants in school colors with the school letters on them. Each teacher was given ten and assigned a particular day of the week for her class to be responsible for the yard. At roll call in the morning the children received their pennants and proudly wore them all day. After eating their lunches these children were allowed to go out five min-

utes earlier than the others and spent the remainder of the lunch period picking up paper. One pupil, who was a problem child, was made custodian of some large cans which had been emptied in the lunch department. These he issued to the group as containers for the paper. He accepted this responsibility with great seriousness, gave the cans out with pride, and his behavior was soon much improved. This plan continues to hold the children's interest and to prove effective in its purpose.

Corporal punishment is used only as a last resort and then care is taken that the element of anger is not present. Praise and not blame is the policy. Any obscene writing in the building is quietly and quickly removed by the custodian without any reference bringing it to the children's attention. Every effort is made to foster a love for and pride in good care of the building and to inspire interest in exhibiting good character traits. A definite attempt is made to assure a feeling of security and success in every child's life.

CONDITIONS AFTER THE PROJECT

No active play for thirty minutes before or after lunch
thus meeting the standard requirement

Nursery rugs on floors in primary department

Individual rugs for rest after lunch in primary grades

Rest period after lunch

Masterpiece pictures in all rooms and several in the

Fe

halls

Reading in basic texts sent home with younger children only after it has been mastered, thus provoking praise instead of blame

Corporal punishment -- the exception and not the rule

HYGIENIC ATMOSPHERE AS RELATES TO THE TEACHER

The teacher's health status is equally important both from the standpoint of her own good and that of the pupils. A sound body means a sound mind -- so the overtaxed teacher will naturally be crosser and less effective than the rested person. A feeling of security is necessary to one's well being, thus the tenure law gives the teacher this needed feeling of security. The citizens' committee of the state drew up certain school recommendations which were passed. This allows six days for illness with a cumulative maximum of seventy-two days. The retirement system provides for a monthly payment after the teacher is no longer in active service. This provision for old age gives an added feeling of comfort.

The twelve month payment practice included in the citizens' plan enables the teacher to go through the summer months without strain. Heretofore summer school expense with no salaries presented a real problem. Again the citizens' committee's recommendation of salaries, governed by and commensurate with the qualifications, gives the teacher a feeling of recognition and some tangible return for money spent in preparation

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The principal's supervision of the lunch department gives the teacher a thirty minute relaxation period free of the children. This is a needed break in a day of strain and tension, in addition to a social period with co-workers which gives impetus to a better afternoon's work. Many other small but effective ways are provided to relieve the teacher's strain and make for her better health.

An undisturbed place for teachers to work after school is provided and there is a limitation of extra-curricular activities, both of which are conducive to longer and more efficient years of teaching. An attractive teachers' lounge, where one may lie on the couch a minute after lunch if feelings so decree, lends an air of comfort and congeniality. The chest X-ray, sponsored by the government, affords a needed protection to the teacher and child. A teachers' library, including good professional current books, provides a source of ready help. This prevents the necessity of trips to libraries or other sources. The practice of periodical group meetings proves helpful, inspiring and productive of better teaching.

A definite policy exists of making intangible provisions which are even more important, possibly, than the physical ones. There is recognition of work well done by administrative and supervisory personnel, credit given where credit is due and sincere expressions of appreciation rendered. These do much to raise the teachers' morale and inspire greater effort. Personal

affairs are given consideration, special privileges are accorded when necessary and planning is cooperative with recognized feeling that everyone's suggestions have equal weight according to value. The underlying philosophy makes the policies democratic, constructive and approved. The result is a busy, happy atmosphere free of friction and petty incidents.

CHAPTER VII

GUIDANCE

CONDITIONS BEFORE THE PROJECT

Little case history study

Few home visits by the teacher

No class study of radio and movie programs

No bulletins on choosing leisure time activities, movies, radio programs and comic books

No helps cited to strengthen and guide parents in their efforts to guide their children

Few references among teachers, parents and principal, relative to child guidance

A STUDY OF THE GUIDANCE PROGRAM

Child guidance is a cooperative undertaking of teacher and principal involving a daily study of the child. Information is obtained from every source. The nurse, mother, pastor, playmate, neighbor or anyone who can contribute any detail to a file of knowledge makes the handling of that child more effective. He comes into school bringing with him his family, his inheritance, his problems -- all the many things that comprise his environment and associations. He is a sum total or product of all that effects his life and his behavior. To know the home, parents, environment, associations, et cetera, is to deal more understandingly with the child. For that reason each teacher endeavors to visit the home of each

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child during the first month of school.

A very effective program is presented in the Parent-Teacher Association meeting with the doctor, the supervising nurse and the school nurse speaking on pertinent health problems, then opening the meeting for questions. At other times welfare workers, visiting teachers, recreational leaders, pastors, the juvenile judge and other guidance personnel are brought before the group. Parents express themselves as feeling that his type of program meets a real need, and they are highly appreciative of it.

A bulletin is issued periodically which gives informative material concerning healthful practices and stresses the importance of applying them. Reasons are cited why it is better for a child to eat his lunch at school where the meals are well-balanced and well-planned. Proper hours of sleep for different ages are given and practice of same is urged. Parents are advised to prohibit their children listening to radio programs of great emotional strain at any time, but particularly before retiring. They are warned of the harm of movies producing undue excitement and presenting scenes deteriorating to character building. Magazines that classify movies into categories for children are listed for reference and parents are urged to allow their children to attend only those movies which are approved for children.

Radio and movie programs are studied in the classroom. Programs of child preference are listed and their merits or

• Location of site of origin and depth of water

evils are discussed. Children study why certain ones are not desirable, learn how to judge a program and which programs are worth-while. Children are informed that noise produces a strain on the nerves and are cautioned against the habit of keeping the radio on incessantly. Good citizenship is emphasized consistantly and continuously.

CONDITIONS AFTER THE PROJECT

Teachers are endeavoring to visit in the home of each child during the school, preferably in the beginning. Some case study is being made and a few books on guidance have been added to the library. One teacher is doing study in guidance and two others are beginning a three year course in case study under Dr. Prescott's direction.

The policy has been adopted of sending periodical bulletins into the homes giving informative, helpful and encouraging material on healthful living. The bulletins deal with the physical, mental and moral aspects. Definite guidance is being given by the instructional personnel emphasizing character building and home making.

A comprehensive questionnaire is filled on each beginner and filed in the cumulative record folder. Hence it is passed on with the child.

In the post planning period each teacher is furnished with the names of her new class. Time is allocated for conferences between the past and future teacher for study of each child

with as comprehensive a history of that child as is recorded. Personalities, preferences, interests, abilities and the many things that enter into the grouping of the children are given careful consideration.

Assembly programs promoting the child's initiative, ability and interest have improved.

Obscene writing in the basements has practically disappeared.

WHAT REMAINS TO BE ACCOMPLISHED

A well defined philosophy of guidance cooperatively formed.

A recognition of the scope, importance, opportunities and tremendous possibilities of a comprehensive guidance program

An adequate library on guidance

A well planned guidance program

A definite provision for and improvement of community leisure time activities

A well planned program of conferences involving parent, teacher, principal and pupil

An effective program of parent education in the guidance field

A united effort for building right attitudes and forming right habits

A greater realization that school exists for the development of the whole child

A growing inquisitive awareness of community resources and the value of using same

A greater appreciation of the value of cooperative planning including all school and lay personnel interested in the welfare of children

CHAPTER VIII

THE TEACHER'S PART IN THE HEALTH PROGRAM

The teacher tries to maintain a high level on her own health, be enthusiastic, and set a good example of calmness and poise with right habits and attitudes toward health practices. She endeavors to insure the child a feeling of security, and develop in him a sense of responsibility for his own health. She studies the communicable disease chart and handbook from the local unit so that ready reference is made when it is needed. She stresses health habits as: washing hands before meals and after going to the toilet, carrying a handkerchief and knowing when to use it, drinking water without touching the fountain, refraining from visiting children with communicable diseases, et cetera. She keeps a cumulative guidance folder containing the child's health record which is passed on when he is transferred. She uses the health text as a guide (not a reader) for specific information and daily practices.

The teacher practices health living with her own physical examination each year. She keeps the classroom in healthful condition by proper ventilation, heating, adjustment of shades, seating, et cetera. She makes daily health observations and reports any condition needing attention. She keeps the health records, records weight and height periodically and makes hearing tests. All information possible is secured about the home and environment of the child.

Conferences are held with the parents and study is constantly made of health methods and materials for dealing with children. The teacher is conscious of her influence on the emotional life of the child, and tries to maintain poise and keep a sense of humor. She endeavors to inculcate those habits in the children that will lead to emotional stability and poise. She sends out notices to parents indicating needed attention. She strives to promote health and create a love for it by teaching that through health one may become attractive personally, succeed in athletics, be accepted in the armed forces, follow a chosen vocation, live happily, et cetera. The teacher secures all the information possible about the child through observation and contacts with the parents, school nurse, pastor, visiting teacher, and the child's associates, friends and neighbors.

She keeps informed on first-aid knowledge and practices it. An effort is made to improve the health status of children by the correction of defects, to reduce absences due to physical and mental illnesses, and to comply fully with the immunization program. She plans with the class for a school day of living together cooperatively and avoiding strain through relaxation.

The teacher and child keep charts of progress through which medium the child is spurred on to greater effort -- hence to greater accomplishments. She strives to find in each child progress for which to give praise -- knowing that

little blame and much praise yields large dividends. She notices the little new things so dear to a child's heart and comments on them. She tactfully discourages a child's taking more than his share of attention and guides rather than suppresses his enthusiasm. She strives to lend an interested, understanding, sympathetic ear to each child and make each one feel that he is an appreciated individual in the group. Finally, she endeavors to insure in each child a sense of belonging and a feeling of success each of which she recognizes as a must in a child's happy, wholesome progress.

CHAPTER IX

THE HEALTH PROGRAM

A PRACTICE AND NOT A THEORY AS RELATED TO THE CHILD

The health education of the child carries over into the home life in many ways. He knows the danger of eating foods where he bites it after another, recognizes well-balanced menus, appreciates attractiveness in serving foods, and knows why he should practice right eating. He understands protection of eyes, right habits in reading, and the need for proper rest. He knows the amount of sleep required at different ages, and the harmful effects of emotional movies and radio programs. He knows the reasons for immunization and has a knowledge of the causes of tooth decay and the need for proper care of temporary teeth.

He realizes and appreciates the value of a chest X-ray and a yearly physical and semi-yearly dental examination. He understands something about preventing colds, and fighting the enemies of alcohol, tobacco and narcotics. He knows why bad posture is undesirable and why persons with contagious diseases should be isolated. He knows the value of cleanliness, orderliness and the formation of right habits while young. He knows the importance of sanitary measures in handling food and the harmful effects of thumb sucking. He realizes the necessity of using a tooth brush and of keeping the hair free of pediculosis. He knows the simple meaning of mental hygiene

and understands some reasons for striving to develop poise and self control.

He knows the simple meaning of the word personality and understands something of its power in life situations. He appreciates some of the finer things of life, something of his indebtedness to future generations in appreciation for his heritage, and something of his obligation to pass on to others a world made better by his contribution.

With such a program, health instruction has become vitalized. It is a practical every day experience -- a daily way of living and not something to be trained for in later life. Health living is a practice -- not a theory.

Thus the teacher's aim "to insure health knowledge and practice" and the child's aim "to be healthy" are definitely bringing accomplishment to fruition.

THE UNIVERSITY OF CHICAGO

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MATERIALS

Films (16MM)

Care of the Teeth	1 reel
Smiles Have It	1 reel-sound
Why Willie Was Willing to Wash	
Health and Happiness	1 reel
Confessions of a Cold	1 reel

State Board of Health, Jacksonville, Florida

Priceless Pearls	2 reels
How You See	$\frac{3}{4}$ reel
Drinking Health	2 reels
Housing in Our Time	2 reels
Life Saving	$1\frac{1}{2}$ reels

General Extension Division, University of Florida, Gainesville, Florida

Story of My Life	1 reel
Goodbye Mr. Germ	1 reel

Florida Tuberculosis and Health Association, Jacksonville, Florida

Good Foods - Milk	$\frac{3}{4}$ reel
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Florida Cooperative Film Library, University of Florida, Gainesville, Florida

